

NATIONAL Assessment Centre Services

(wef 1 Jan'09) MHA118059326

Date In: 2/1/18-15:04	Job description	Date & Time Completed	Done by
Ref No: NA/CT218008355/24	SAS e-filing		
Veh No: GX1999K	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 5/1/18-10:40	i-Motor Claim Form		
OD TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel: (Fax: (
TP Particulars:	Veh No: 6210024	INC () / Non-INC ()
Owner / Driver: (Tel: (
Policy No: (Period: (Cover Type: (
Confirmed by: (Date: (Time: (
Insured/Driver Liability: (% [Note-Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%]	
Year of Registration: (Warranty: YES () / NO ()	
Excess: (\$	Loading: \$1,000 () / \$2,000 ()	

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks:-	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

NA1802858	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
		In Bill	Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2009)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	QD:		
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
Auditors' Comments:-	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (N-on INC) against INC \$20		
Ref. 1:	9) N12: Idac Mobile 30		
Ref. 2 / 3:	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	07/05/2018 15:04
Date Of Accident	05/05/2018 10:40
Exact Location Of Accident	ALONG MEYER RD BEFORE JUNC BROADRICK RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX1979K
Insured/Policyholder	
Name Of Registered Owner	M/S SG LEASING PTE LTD
Co Reg No	201317520E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91122958
Alternative Phone No	OFFICE-91122958

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE DIESEL
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN1617591802
Cover Note Number	

Driver

Name of Driver	WONG CHIN YUNG
NRIC No	S7460855H
Date Of Birth	04/07/1974
Occupation	OUTDOOR
Date Of Driving Pass	13/01/2006
Driving Experience	12 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96926098
Fax Number	
Contact Number	OFFICE-96926098
Email Address	NOEMAIL

Address	BLK 50 LORONG 28 GEYLANG #04-02
Postcode	398453
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : - GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GZ1202H
Vehicle Make/Model/Colour	TOYOTA HIACE
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	NGASRI BIN RAJA
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



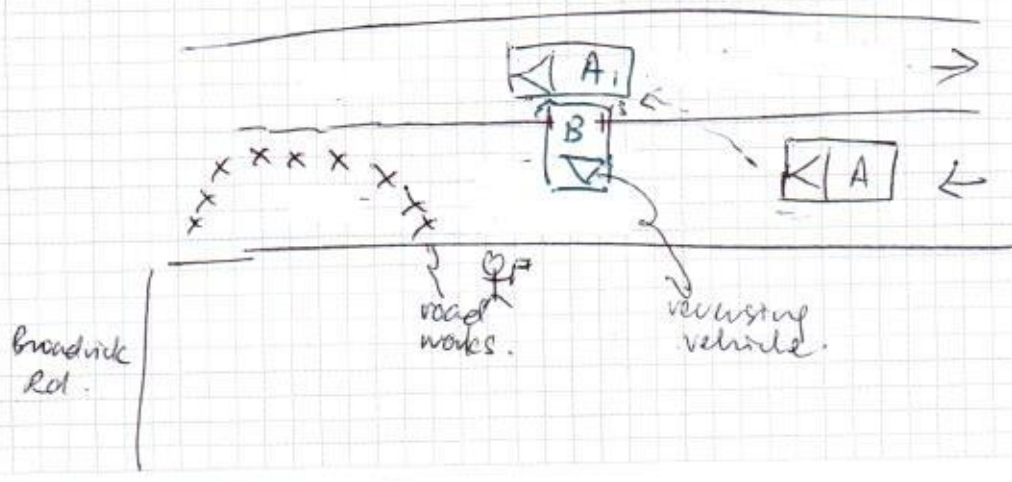
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

Meyer Rd



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Meyer Rd (Katong) on a single lane dual carriage way. Somewhere before broadrick road, I was directed to go on the opposite direction road due to road works along meyer road to broadrick road. As I was moving straight, vehicle B suddenly reversed and collided into my vehicle. Hence I was involved in an accident of 2 vehicle.

Vehicle A: GX 1979K.

Vehicle B: GZ 1202H.

DECLARATION

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature
Date & Time:

[Signature]

Driver's Signature
(If driver is not the policyholder)
Date & Time:

[Signature]

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Date of Accident : 5 May 2018 Accident Time: 10:40 (24-HR-Format)
 Accident Place : Meyer Rd (Katong) before Broadrick Rd.
 Vehicle No. (Car Plate No.) : Gx 1979 K Make/Model: Toyota Hiace.
 Insurance Company : China Taiping Policy No: PMCVSN 1617591802
 Owner or Company Name /IC No. : SG Leasing Pte Ltd.
 Owner or Company Contact No. : 911 2 2958 (ben). Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : WONG CHIN YUNG S7460855H
 DRIVER'S Date Of Birth : 04-07-1974 DRIVER'S License Pass Date 13 Jan 2006
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
 DRIVER'S Address : Blk 50 Lorong 28 Geylang #04-02 S(378453)
 DRIVER'S Contact No./ Alt No. : 1) 9692 6698. 2) _____
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : sales@mia.com.sg
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 01-Driver 01-Passenger (1)
 Was there any video Captured by car camera: YES \ NO .
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
 Any Injury (If YES, Pls state): _____

Other Party Driver's Particular (if any)

Vehicle No: <u>G2 1202 H.</u>	Vehicle No: _____
Vehicle Make/Model: <u>Toyota Hiace.</u>	Vehicle Make/Model: _____
Name Driver: <u>Ngasvi Bin Raja.</u>	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

*** NEW - Passenger's name & gender:**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B Motorcycles <= 200 cc
 Class 3 Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver, and other motor vehicles with unladen weight <= 2500kg

27 Dec 2005
 13 Jan 2006



License No. S7460855H

NP 428A

9158358



License No. S7460855H



Nationality
MALAYSIAN

Date of Issue
 21-03-2012

APT BLK 50 LORONG 28 GEYLANG #04-02
 SINGAPORE 398453

S7460855H

13/02/2014

REPUBLIC OF SINGAPORE DRIVING LICENSE

License Number: **S7460855H**

Name: **WONG CHIN YUNG**

Birth Date: **04 Jul 1974**
 Issue Date: **30 May 2017**

002688604C



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7460855H**

Name

WONG CHIN YUNG

黄进永

Race
CHINESE

Date of birth
04-07-1974

Country of birth
MALAYSIA

Sex
M

1613915



MOTOR COMMERCIAL VEHICLE

CERTIFICATE OF INSURANCEMotor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

CERTIFICATE No.	DMCVSN1617591802	Engine No : 5L5411633
		ChaNo: LH1621010658
1. Index Mark and Registration Number of Vehicle	GX1979K	
2. Name of Policy Holder	M/S SG LEASING PTE LTD	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	02 March 2018	Excess Sect. II S\$1,500.00
4. Date of Expiry of Insurance	01 March 2019	
5. Persons or Classes of Persons entitled to drive*		

Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*


- (1) Use for racing, pace-making, reliability trial or speed-testing.
- (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
- (3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:  SG MOTOR TRADER PTE. LTD.
Authorised Officer
Authorised Signatory